



**Tennessee Department of Environment and Conservation  
Division of Remediation - Drycleaner Environmental Response Program  
401 Church Street, 4<sup>TH</sup> Floor, L&C Annex  
Nashville, Tennessee 37243**

**Drycleaning Facilities Registration**

**1. REGISTRATION TYPE: (Circle one)** Initial Revised Renewal Abandoned

(a) Indicate the date drycleaning operations began or will begin at this location (initial registration only). \_\_\_\_\_

Providing the facility no longer has on-site drycleaning operations at this location registration is not necessary unless the property owner chooses to register as an abandoned facility. Notification of the change to DCERP is necessary. Maintain a copy for your records.

**2. FACILITY INFORMATION:**

Registration No.: D-\_\_\_\_\_

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_ EPA ID (if applicable) \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Facility Owner (name): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Facility Owner Address: \_\_\_\_\_

Property Owner (name): \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

Preferred Mailing Address (Check One): ☐ Facility ☐ Facility Owner ☐ Property Owner

(a.) Is the dry cleaning facility located in a building with: (Check all that apply)

☐ A Residence ☐ No Residence ☐ Leased Space ☐ Owner/Occupants.

(b.) Did you submit each quarterly solvent report during the past year? (Yes/No) Do the solvent purchases identified in the quarterly reports represent all solvent that was obtained and on which the appropriate surcharge was paid? (Yes/No) If no, explain. \_\_\_\_\_

(c.) In the past year did you sell or transfer solvent to another drycleaning facility? (Yes/No) If yes, identify the date, facility and quantity of solvent sold or transferred. \_\_\_\_\_

(d.) Registration will be withheld if no solvent purchases were reported in the past year and a detailed explanation, including solvent inventory and solvent storage capacity, is not attached stating how the facility operated without additional solvent.

**3. CED/ECT:**

All registered drycleaning facilities must be staffed by at least one person who is a Certified Environmental Drycleaner (CED) or has a DCERP Environmental Compliance Training (ECT) certificate. Attach a copy of the CED or ECT certificate. Registrations will be withheld if proof of CED or ECT is not submitted.

Circle appropriate category ( CED or ECT ). Expiration Date of CED/ECT: \_\_\_\_\_

**4. MACHINE SPECIFIC INFORMATION:**

Fill out the information requested for each drycleaning machine at your facility. If you have only one drycleaning machine fill out the information listed under Machine A. If your facility has two drycleaning machines, designate one machine as machine A and the other as machine B and fill out the information for each. If your facility has more than two drycleaning machines, make a copy of the following page and designate additional drycleaning machines C, D, etc. and complete the information requested for each machine.

**Machine A:** Machine Make: \_\_\_\_\_ Model: \_\_\_\_\_ Type of Solvent used: \_\_\_\_\_  
 (a) Age of machine: \_\_\_\_\_ Date put into operation at this location: \_\_\_\_\_: Machine type [transfer, dry to dry vented, dry to dry non-vented, (Circle one): How is the solvent obtained? (Circle one) Closed loop /direct coupled or other. If other, explain delivery method: \_\_\_\_\_  
 (b) All sludges, still bottoms, filters, lint, dust and separator water contains remnants of drycleaning solvent and must be disposed of properly. Please identify the hazardous waste company you use to dispose of this waste \_\_\_\_\_.  
 (c) Separator water may be disposed of using an evaporator with a carbon filter or a mister with a carbon filter. If you are using this type of machine please give the make/model of the machine you are using: \_\_\_\_\_. Does this piece of equipment have secondary containment as required by the DCERP Rules? (Circle one) Yes/No  
 (d) Is there containment under/around the machine? (Circle One) (Yes/No) If yes, indicate the capacity and the construction material of the containment. \_\_\_\_\_.

**Machine B:** Machine Make: \_\_\_\_\_ Model: \_\_\_\_\_ Type of Solvent used: \_\_\_\_\_  
 (a) Age of machine: \_\_\_\_\_ Date put into operation at this location: \_\_\_\_\_: Machine type [transfer, dry to dry vented, dry to dry non-vented, (Circle one): How is the solvent obtained? (Circle one) Closed loop /direct coupled or other. If other, explain delivery method: \_\_\_\_\_  
 (b) All sludges, still bottoms, filters, lint, dust and separator water contains remnants of drycleaning solvent and must be disposed of properly. Please identify the hazardous waste company you use to dispose of this waste \_\_\_\_\_.  
 (c) Separator water may be disposed of using an evaporator with a carbon filter or a mister with a carbon filter. If you are using this type of machine please give the make/model of the machine you are using \_\_\_\_\_. Does the water treatment unit have secondary containment as required by the DCERP Rules? (Circle one) Yes/No  
 (d) Is there containment under/around the drycleaning machine? (Circle One) (Yes/No) If yes, indicate the capacity and the construction material of the containment. \_\_\_\_\_.

#### Best Management Practices:

Best Management Practices (BMPs) are designed to prevent possible future releases of drycleaning solvents into the environment. Rule 1200-1-17-.04 requires all drycleaning facilities to be in compliance with Best Management Practices. Additional details about the requirements can be found on the following web page <http://www.state.tn.us/sos/rules/1200/1200-01/1200-01-17.pdf> or call 615-741-2281 for more information.

#### 5. CERTIFICATION:

\_\_\_\_\_  
 Printed Name and Title Signature Date

In accordance with Rule 1200-1-17-.04, after being duly sworn, I certify under penalty of law, including but not limited to penalties for perjury, the facility identified above is in compliance with all required Best Management Practices for drycleaning facilities and that the information contained in this form and on any attachments is true, accurate and complete to the best of my knowledge.

STATE OF TENNESSEE

COUNTY OF \_\_\_\_\_

Personally appeared before me, the undersigned, a Notary Public within and for the State and County aforesaid, \_\_\_\_\_, with whom I am personally acquainted, and acknowledged that he/she executed the within instrument for the purposes therein contained.

WITNESS, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
 Notary Public

My Commission Expires \_\_\_\_\_

## Instructions for the 2009 Drycleaning Facilities Annual Registration

Submit a completed Annual Registration Form to the Department by October 31st of each year. An initial form must be submitted two weeks prior to commencement of operations. In addition, a revised form must be submitted within 30 days after a significant change in the facility. A change in information, which requires filing a revised registration form, includes the following: a change in ownership or other information (identified in Section 1 and 2 of the registration form). Appropriate documentation supporting the change must be submitted along with the revised registration. Maintain a copy of the registration and any changes for your records.

1. **Registration Type:** Circle the registration type; Initial, Revised, Renewal or Abandoned. An abandoned facility means any real property premises or individual leasehold space on which a drycleaning facility formerly operated. Initial registrations will be assigned a registration number by the Department. Fill in date operations began for initial registrations only.
2. **Facility Information:** Fill in the facility's name, address, city, state, zip code, EPA ID number (if applicable) and the phone number. Provide the facility and property owner information. The owner is defined as the person or entity that owns the drycleaning facility. The property owner means any individual or entity that is vested with any ownership, dominion, or legal or rightful title to the real property or control over the facility. Check the box to specify the preferred mailing address for all correspondence. Complete 2(a) through 2(d) as noted below.

**Important Note:** Drycleaning facilities are required to report drycleaning solvent purchases to DCERP on a quarterly basis otherwise their registration can be revoked. The quarterly purchase logs are due by the end of the month following the reporting quarter as follows:

### Purchase Log Due Dates:

<u>Quarter</u>	<u>Reporting Deadline</u>
1st (January – March)	April 30 <sup>th</sup>
2nd (April – June)	July 31 <sup>st</sup>
3rd (July – September)	October 31 <sup>st</sup>
4th (October – December)	January 31 <sup>st</sup>

The purchase logs may be faxed to (615) 741-1115 or mailed. To mail a Purchase Log to DCERP use the address below:

Division of Remediation  
Drycleaner Environmental Response Program  
4th Floor L&C Annex  
401 Church Street  
Nashville, TN 37243

- a) Check the appropriate box for where the dry cleaner is located.
  - b) Indicate if you submitted all quarterly solvent reports during the year. Circle (yes/no) if you reported all solvent purchases/transfers on the quarterly solvent reports and if the appropriate solvent surcharge fees were paid. Reminder, even solvent purchased from out-of-state suppliers must be reported and surcharges must be submitted by the vendor.
  - c) Indicate if you sold or transferred drycleaning solvent to another drycleaning facility during the year. If yes identify the date the solvent was sold or transferred, the drycleaning facility which received the solvent, and the quantity of solvent sold or transferred. Note: a permitted solvent supplier or a licensed hazardous waste hauler must transfer solvent.
  - d) If you did not purchase any solvent during the year, explain how you were able to operate without any additional solvent. Identify the quantity of solvent at the beginning of the year and the current quantity of solvent in the machine and storage.
3. **CED/ECT Information:** Active dry-cleaning facilities must be staffed with a Certified Environmental Drycleaner (CED) or have completed the DCERP ECT (Environmental Compliance Training) course. Include a current copy of the CED certificate or the ECT certificate with the registration.
  4. **Machine Specific Information:**
    - a) Fill in the age of the machine, when the machine was placed into operation at this facility, the machine type and indicate the method of solvent delivery from the supplier. All "perc" machines must have their solvent delivered by the closed loop direct coupled method, but other solvents may be delivered in a different method. If more than one method is used describe all methods in the space provided.

- b) Provide the name of your hazardous waste handler.
- c) If you are using an evaporator or a mister with a carbon filter provide the make/model of the machine you are using. This piece of equipment also requires secondary containment. Please indicate if there is containment under this equipment.
- d) Indicate if there is containment under or around the drycleaning machine. Write the capacity of the containment system and the type construction material of the containment.

5. **Certification:** Compliance with Class 1 and Class 2 BMPs is included with the certification. The owner/manager or an authorized representative of the drycleaning facility must sign; include their title and the date signed. For a corporation, a responsible corporate officer should sign the registration form. A responsible corporate officer means: a president, secretary, treasurer, vice-president or any other person who performs similar policy or decision making functions for the corporation. For a partnership or sole proprietorship, the general partner or the proprietor should sign the registration form.

**Important Note:** The registration form must be notarized or the registration will be withheld.

If you have any questions, contact the Tennessee Drycleaner Environmental Response Program at (615) 741- 2281.

**Make checks payable (no cash) to: "Treasurer, State of Tennessee"** for the total fee invoiced and submit along with the 2009 annual registration form and your 3<sup>rd</sup> quarter solvent purchase log in the enclosed envelope to:

Department of Environment and Conservation  
Division of Fiscal Services – Fee Section  
14th Floor L&C Tower  
401 Church Street  
Nashville, TN 37243